

**Artefactual nanoparticle activation of the inflammasome platform:  
*in vitro* evidence with a nano-formed calcium phosphate.**

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## Abstract

**Aim:** To determine whether *in vitro* experimental conditions dictate cellular activation of the inflammasome by apatitic calcium phosphate nanoparticles. **Material and Methods:** The responses of blood-derived primary human cells to *in situ*-formed apatite were investigated under different experimental conditions to assess the effect of aseptic culture, cell rest and duration of particle exposure. Cell death and particle uptake were assessed while IL-1 $\beta$  and caspase 1 responses, with and without lipopolysaccharide pre-stimulation, were evaluated as markers of inflammasome activation. **Results:** Under carefully addressed experimental conditions, apatitic nanoparticles did not induce cell death or engage the inflammasome platform although both could be triggered through artefacts of experimentation. **Conclusion:** *In vitro* studies often predict that engineered nanoparticles, such as synthetic apatite, are candidates for inflammasome activation and, hence, are toxic. However, the experimental setting must be very carefully considered as it may promote false positive outcomes.

**Keywords (6-10):** Apatite, nanoparticle, Interleukin-1 $\beta$ , caspase 1, Inflammasome, experimental conditions.

## 1. Introduction

Human exposure to existing and novel nanostructures, or existing materials that have now been nano-engineered, is inevitable. A complete assessment of their interactions with the host must be addressed appropriately. It is well established that properties of the particles themselves (e.g. size, shape, aspect ratio, dispersion state and rate, composition, surface charge, solubility etc.) and their interaction at the biological interface (e.g. formation of loose and hard protein corona, interaction with cell membrane etc.) dictate how particles behave and how they are seen and handled by cells [1-3]. Nonetheless, despite this heterogeneity in the physicochemical and biological properties of all that is termed ‘nano’, there are some properties that are more generally ascribed to nanoparticles than to their soluble or bulk counterparts [2]. One of these is an ability to activate the cellular inflammasome. In 2006, the late Jurg Tschopp and colleagues reported on the activation of the inflammasome by uric acid and calcium phosphate crystals [4]. Since then numerous (engineered) nanoparticles have been attributed as inflammasome activators including silica, titanium dioxide, aluminium hydroxide and calcium phosphates [5-10].

Both inflammasome and calcium phosphate are terms that encompass families. First the inflammasome: when caspase 1 is activated in a cell it has very specific targets. Pro-IL-18 and the more widely studied pro-IL-1 $\beta$  are cleaved to form the active, and mostly pro-inflammatory, cytokines (mature IL-18 and IL-1 $\beta$ ). Canonical activation of caspase 1 is driven by the inflammasome platform following interactions of inflammasome sensor molecules (NOD like receptors; NLRP and also the PYHIN family protein AIM2) and the CARD-containing apoptosis associated speck-like protein (ASC) [11, 12]. Thus for IL-1 $\beta$  to be secreted by cells both the pro-cytokine must be transcribed and translated, and the inflammasome platform activated. Some molecules activate the inflammasome; some activate

gene up-regulation of the pro-cytokines and some do both [11, 12]. Nanoparticles and especially nanominerals have acquired the reputation for inflammasome activation, sometimes concomitantly activating pro-IL-1 $\beta$ .

Secondly, the calcium phosphates: these vary in structure from fully amorphous calcium phosphate (ACP), with a primary grain size as small as 9 Å, to fully crystalline forms such as monetite, tricalcium phosphate and hydroxyapatite. Aside from ACP, all show a degree of crystallinity and, recently, the biologically-relevant calcium phosphate family members have been comprehensively reviewed by Dorozhkin [13]. Synthetic apatites that fairly closely correspond to biological apatite (i.e. bone mineral) are said to activate the inflammasome and induce IL-1 $\beta$  secretion by cells [14-17].

Most reports of nanoparticle-induced activation of the inflammasome have provided elegant detailed molecular biology-based studies characterising the exact inflammasome platform and the various steps involved in activation. Less attention, however, has generally been paid to some basic but important particle and cell details. For example, what does the particle carry on its surface? What might it interact with in the cell culture medium? What is the importance of the cell activation status? When does particle uptake in culture exceed the *in vivo* situation where cells can migrate and be replaced by fresh ones? Here we have partly addressed these issues, focussing on apatitic nanoparticles which we previously reported could induce cellular IL-1 $\beta$  secretion [17]. We chose not to undertake molecular studies of the inflammasome but, rather, to use IL-1 $\beta$  secretion, and in places caspase 1 secretion, as robust markers of inflammasome activation when experiments are carefully designed.

## Material and Methods

### Assessment of *in vitro* particle formation and sizing

#### Preparation of calcium chloride solution

A stock solution of 40 mM calcium chloride ( $\text{CaCl}_2$ ) was prepared by adding 0.58 g calcium chloride dihydrate ( $\text{MW} = 147.02 \text{ g/mol}$ , AnalaR; BDH, VWR International Ltd, Poole, UK) into 100 ml 0.9 % sodium chloride solution (saline, Sigma-Aldrich, Poole, Dorset, UK). After autoclaving, a 20 mM working solution was made up by diluting the stock solution 1:1 with saline.

#### *In situ* formation of calcium phosphate particles

In this protocol, for the formation of calcium phosphate particles *in situ* in a tissue culture medium (TCM), 4 mM (final concentration of *additional Ca*)  $\text{CaCl}_2$  was added to supplemented TCM (namely RPMI 1640 which is naturally rich in phosphate, containing additionally 10 % heat inactivated fetal calf serum (FCS, PAA), 2 mM L-Glutamine (Sigma), 100 U/ml penicillin (Sigma) and 100  $\mu\text{g/ml}$  streptomycin (Sigma)) [17]. As such, 250  $\mu\text{l}$  of the calcium chloride solution were added to 1 ml supplemented TCM in 5 ml polystyrene round bottom tubes (Marathon Laboratory Supplies), yielding an additional concentration of 4 mM  $\text{Ca}^{2+}$  and hence precipitation of calcium phosphate particles which were characterised as below.

#### Particle sizing

To investigate the size distribution of calcium phosphate particles that formed in the supplemented TCM over 24 hours, freshly prepared samples were analysed by three independent methods namely, nanoparticle tracking analysis (NTA), dynamic light scattering

(DLS) and static light scattering (SLS) at time points 3, 8 and 24 hours. Consistent with manufacturer's guidelines, data for NTA, DLS and SLS are represented as particle number ( $10^6/\text{ml}$ ), intensity (%) and volume frequency (%) respectively, as detailed below.

#### a-NTA

NTA was performed on a Nanosight NS500 (Nanosight, Amesbury, UK) using NTA2.3 Analytical Software. Particle suspensions were diluted eightfold (25 fold for time point 24 hours) in supplemented TCM before samples were measured in technical triplicates for 60 seconds each and results were averaged. 2 independent experiments were performed, each consisting of 3 replicate samples per time point. Data are shown as means of the 6 replicates (4 replicates for time point 24 hours).

#### b-DLS

DLS was performed on a Zetasizer Nano ZS (Malvern Instruments Limited, Malvern, Worcestershire, UK) using Dispersion Technology Software 4.20. Triplicate measurements were taken from undiluted particle suspensions applying refractive indices of 1.63 for calcium phosphate particles and of 1.33 for the dispersant. 3 replicate samples per time point were performed and data are shown as mean.

#### c-SLS

SLS was performed on a Mastersizer 2000 with a Hydro 2000 $\mu\text{P}$  Micro Precision sample dispersion unit (Malvern Instruments Limited). The measurement procedure was adapted to enhance sensitivity and to preserve the experimental conditions under which the particles were formed. Baseline correction was carried out with fresh TCM. Subsequently, the dispersion unit was emptied and refilled with TCM alone or TCM with the additional 4 mM  $\text{Ca}^{2+}$  that had been incubated for 3, 8 or 24 hours. The dispersion unit was run at 500 rpm and great care was taken

to prevent the formation of bubbles. 3 samples were collected for each time point and each sample was analysed in triplicate (refractive index: 1.63; absorption 0.01).

#### Zeta potential measurements

As an indicator of surface charge, zeta potential measurements of particle suspensions were carried out, again at time points of 3, 8 and 24 hours, by laser Doppler velocimetry on a Zetasizer Nano ZS (Malvern Instruments Limited). Electrophoretic mobilities of particles, in an applied electrical field of 8.16 V/cm (effective voltage of 49.8 V; electrode spacing 61 mm), were converted into zeta potentials by Dispersion Technology Software 4.20 using Henry's equation and the Smochulowski approximation for aqueous media. The experiment was performed twice, each time with 3 replicate samples per time point. Data are shown as means of 5 (24 hours) or 6 replicates (3 and 8 hours) with the standard deviations reported.

#### **Structural and chemical determination of *in vitro* precipitated particles**

Following *in situ* formation of calcium phosphate particles for 24 hours, the suspensions were drop cast onto holey carbon support films for transmission electron microscopy (Agar Scientific Ltd). The air-dried films were examined in a FEI CM200 field emission gun TEM operating at 197 kV fitted with an Oxford Instruments ultra thin window Si(Li) energy dispersive X-ray (EDX) spectrometer and a Gatan imaging filter (GIF 200; TEM images were analysed using Gatan's Digital-Micrograph Software (version 3.11.2)).

The elemental content of particles was measured in the TEM by quantification of spot- energy dispersive X-ray (EDX) spectra; the Ca/P ratio was determined from the Oxford Instrument's ISIS processing software using virtual standards for Ca and P K $\alpha$  X-ray peaks, monitored at a take-off angle of 20° and a specimen tilt angle of 15°. In addition to the above, dried calcium phosphate particles and control hydroxyapatite nanopowder (<200 nm, Sigma) were analysed

by FTIR. Spectra were collected using a Golden Gate single reflection diamond ATR accessory (Specac, Orpington, UK) with a Shimadzu IRPrestige-21 FTIR Spectrophotometer using the range 4000-750  $\text{cm}^{-1}$  and 2  $\text{cm}^{-1}$  resolution.

## **Cellular responses to the calcium phosphate particles: influence of experimental conditions**

The study was approved by the research ethics committee of Cambridge (Reference 03/296). For the purpose of the entire work, peripheral blood mononuclear cells (PBMC) were isolated from blood of recruited healthy volunteers, following informed consent, or purchased from the national blood service (NBS, Addenbrooke's Hospital site, Cambridge, UK). For each experimental condition investigated, we used blood cells from 2-4 different subjects unless otherwise stated. PBMC were isolated by density gradient centrifugation. Upon collection, 20-25 ml heparinised blood was mixed at a 1:1 ratio with HBSS (Sigma, UK). 20-25 ml of the mixed solution was then carefully layered over 10 ml Lymphoprep (Axis-Shield, Norway) and centrifuged at 800 g at room temperature for 20 minutes. Separated mononuclear cells were then washed and re-suspended at  $1.10^6$  cells/ml in TCM if used immediately or frozen down for later use. Following cell stimulation, cell supernatants were collected after centrifugation at 1,500 rpm for 5 minutes.

### Effect of particle purity, cell status and duration of exposure

Here, we aimed to examine whether filtration of TCM and resting of cells before experimentation would impact on calcium phosphate nanoparticle formation (Hydroxyapatite, HA) and ensuing cellular responses. To that effect cells were (i) re-suspended in 0.2  $\mu\text{m}$  filtered or unfiltered TCM, (ii) were rested for 24 hours at 37°C in 5 %  $\text{CO}_2$ /95 % air or used straight after isolation/thawing, and then (iii) stimulated with 250  $\mu\text{l}$  20 mM  $\text{CaCl}_2$ , in 5 ml polystyrene



round bottom tubes. Following 24 hour stimulation, supernatants were collected and stored at  $-70^{\circ}\text{C}$  until analysis. Comparative responses were assessed by concomitantly challenging rested PBMC with  $\text{CaCl}_2$  and the microbial associated molecular pattern (MAMP) lipopolysaccharide (10 ng/ml LPS from *E.Coli*, Sigma).

To investigate the cellular responses to HA particles over time, 1 ml cell suspensions ( $n = 2$ ) were stimulated with 250  $\mu\text{l}$  20 mM  $\text{CaCl}_2$  in the presence or absence of 10 ng/ml LPS (Sigma) or equivalent volume of vehicle (0.9 % sodium chloride solution), after 24 hours rest. Supernatants were then collected after 1, 3, 8 and 24 hours incubation at  $37^{\circ}\text{C}$  in 5%  $\text{CO}_2/95\%$  air and stored at  $-70^{\circ}\text{C}$  until analysis.

### **Assessment of calcium phosphate toxicity**

To explore the possible effects of calcium phosphate (HA) on cell death, rested PBMC ( $n = 2$ ) were stimulated with the *in situ* formed HA nanoparticles or with equivalent volume of vehicle for 2 to 24 hours at  $37^{\circ}\text{C}$  in 5 %  $\text{CO}_2/95\%$  air. After each time point, cells were washed 3 times in cold PBS at 400g for 10 minutes at  $4^{\circ}\text{C}$ . Following the final wash, cells were re-suspended in 1x binding buffer (Invitrogen) at  $1.10^6$  cells/ml. 100  $\mu\text{l}$  cell suspension was then transferred to 5 ml polystyrene round bottom tubes where 5  $\mu\text{l}$  annexin V and propidium iodide (PI) (250 ng/ml) were added. After gentle vortexing, the cells were left to incubate for 25 minutes in the dark at room temperature. Finally 400  $\mu\text{l}$  of 1x binding buffer were added to each tube, and samples were analysed by flow cytometry. Results are expressed as percentage of monocytes that stained positively for both PI and annexin V and referred to as % dead monocytes.

### **Measurement of calcium phosphate uptake in $\text{CD14}^+$ cells by flow cytometry and flow imaging**

To demonstrate the cellular uptake of calcium phosphate particles over time, fluorescent calcein (Sigma) was utilised to stain the calcium mineral particles as they formed and thus to identify particles subsequently taken up by phagocytic cells. 1  $\mu$ L of 10 mg/mL calcein solution was added to the PBMC ( $1.10^6$  cells/ml in TCM) prior to the experimental incubation with either vehicle or 250  $\mu$ l 20 mM  $\text{CaCl}_2$ . Following incubation for 1, 3 or 24 hours, cells were washed and stained with PerCP-Cy 5.5 CD14 antibody (BD Biosciences) for 20 minutes, as per manufacturer's protocol, and protected from light thereafter. After washing and fixing in 1 % para-formaldehyde solution, samples were filtered, split and a minimum of 300,000 events per sample immediately acquired using a Cyan ADP flow cytometer (Beckman Coulter) with Summit software for acquisition and analysis. Remaining cells (a minimum of 10,000 events) were acquired using the ImagestreamX, INSPIRE and IDEAS acquisition and analysis software (Merck Millipore Amnis). For each instrument, appropriate unstained and single stained compensation controls were run alongside.

## **Cellular responses to calcium phosphate particles using optimised experimental conditions**

To dissect out further the potential involvement of calcium phosphate particles on inflammasome activation, we applied the optimised experimental conditions to blood cells from four independent subjects. Since there is limited pro-IL1  $\beta$  in resting cells, which needs to be induced via Toll like receptor (TLR) signalling [18], isolated PBMC ( $1.10^6$  cell/ml) were first subjected to LPS pre-stimulation (10 ng/ml for 3 hours) and then challenged with peptidoglycan (Pg) both in a crude (*S. Aureus*) or soluble (*E. Coli*) form (both at 10  $\mu$ g/ml; Sigma and Invivogen respectively) or with the *in situ* precipitated calcium phosphate particles. As positive controls of inflammasome platform activation, cells were also subjected to adenosine triphosphate (ATP, 1 mM)  $\pm$  LPS (10 ng/ml) and monosodium urate crystals (MSU, Caltag-

227 Medsystems Limited; 100 µg/ml). All supernatants were collected following 3 hours  
228 stimulation as well as after 21 hours post challenge.

229

### 230 **Measurement of secreted cytokines and caspase 1**

231 IL-1β and Caspase 1 were measured by commercial ELISA development kits and ELISA  
232 Quantikine kits respectively, following the manufacturer's protocol (R&D Systems).

### 233 **Statistics**

234 All data are expressed as mean ± SEM (unless otherwise stated) and were analysed by two-  
235 way ANOVA tests followed by Bonferroni multiple comparisons, where appropriate. The level  
236 of significance was set at  $p \leq 0.05$ .

## Results

### Physico-chemical characterisation of *in situ* formed calcium phosphate

The (non-precipitating) formation of nanoparticles in (complex) tissue culture medium limits ready separation of the pure nanomaterial. Thus, determination of the *in situ*-formed calcium phosphate structure drew upon multiple imaging and analytical data, namely: morphology, particle size, Ca:P ratio by EDX, selected area diffraction and infra-red analysis. Comparisons were made with established literature data for calcium phosphates.

Addition of calcium chloride (+4 mM) to RPMI 1640, which is a phosphate-rich tissue culture medium (TCM), and subsequent incubation at 37°C in 5 % CO<sub>2</sub>/95 % air, resulted in the formation of nanostructured particles of acicular morphology (**FIGURE. 1A-C**). The primary particle size could be identified as 100-150 nm in images of agglomerated particles (resulting from drying the suspensions on TEM grids). Further internal nanostructure of aggregated ultrafine crystals of individual primary particles could be seen at higher magnification (**FIGURE. 1B-C and supplementary FIGURE. 1A**). In suspension in TCM, particles were typically of 150-180 nm Z average aquated size, as shown by three independent light scattering techniques, (**FIGURE. 1D-F, Table 1 and SUPPLEMENTARY FIGURE. 1B**) which, allowing for the hydration shell, is in the same size range to the nanoparticulate structures observed by TEM (**FIGURE. 1B**). In TCM particle size distribution remained stable for 8 hours but started to shift, marginally, towards large particle sizes by 24 hours (**FIGURE. 1D-F and Table 1**). Zeta potential measures indicated net negative charge of the particles over 24 hours in TCM (**Table 1**).

TEM-EDX, acquired from particles suspended over holes in the support film, confirmed the particles to be calcium phosphate with an average Ca:P ratio of ~1.5 (**FIGURE. 1G**), consistent

with a non-stoichiometric apatite composition [13] that forms in serum-containing medium [19]. Selected area electron diffraction from these particles showed them to be polycrystalline having lattice spacings consistent with an apatite structure when the lattice spacings were matched to the strong reflections of the hydroxyapatite X-ray standard (**SUPPLEMENTARY FIGURE. 1A inset and supplementary table 1**). Infra-red analysis was consistent with hydroxyapatite cultured in TCM (**FIGURE. 1 H-I**) since amine adsorption bands from the serum proteins could be identified at  $1600\text{--}1670\text{ cm}^{-1}$  [20], carbonate adsorption bands were present at  $1465\text{--}1410\text{ cm}^{-1}$  and potential OH broadening from residual water with the main OH band were present at  $3400\text{ cm}^{-1}$  [21]. The remaining bands at lower wavenumber ( $< 1100\text{ cm}^{-1}$ ) are due to lattice absorption and have previously been assigned to HA [22] since there are no other absorption bands for any other calcium phosphate, such as dicalcium phosphate dihydrate and octacalcium phosphate, present in the current spectra [23].

Taken together our findings are consistent with the formation of polycrystalline non-stoichiometric apatite formed *in situ* in TCM which is retained upon drying. Rigorous identification of calcium deficient hydroxyapatites (i.e. C/P ratios in the range 1.5 – 1.67) requires the use of several complementary characterisation techniques and thermal treatment of powders [24]. We do not present powder XRD or thermal treatment results here however the morphology, composition and electron diffraction pattern of what we assume to be representative particles, plus the infrared fingerprint of the bulk material, do indeed invoke the formation of a non-stoichiometric apatite phase [20–22]. Since cells are exposed to the freshly formed hydrated species we use the terms ‘apatite’ and ‘apatitic’ throughout.

## **Innate cellular responses to the apatitic nanoparticles: influence of experimental conditions**

### Effect of resting of cells and TCM filtration

284 Having characterised the chemical and structural properties of the *in vitro*-precipitated calcium  
285 phosphate (apatite), we next investigated the cellular properties of these nanoparticles in the  
286 context of different experimental conditions. Cellular isolation is harsh and incurred stress lead  
287 to the release of endogenous danger signals (danger activated molecular patterns) and  
288 activation of purinergic receptors, all of which contribute to inflammasome activation and  
289 consequent IL-1 $\beta$  production (so called sterile inflammation) [25, 26]. For example, if cells are  
290 stimulated with LPS then mature IL-1 $\beta$  is principally observed in freshly isolated monocytes  
291 rather than their one-day rested counterparts [27-29]. Therefore we first tested whether this  
292 also applied to primary human blood cells stimulated with the freshly formed apatitic  
293 nanoparticles. Unrested cells secreted significant amount of IL-1 $\beta$  in response to challenge with  
294 the apatitic nanoparticles over 24 hour when compared to un-challenged cells over the same  
295 time period (**FIGURE. 2A; p<0.05**). Resting cells prior to experimentation significantly  
296 reduced IL-1 $\beta$  secretion in response to apatite (**FIGURE. 2A**). Addition of LPS, however,  
297 restored the IL-1 $\beta$  secretory effects of unrested cells (**FIGURE. 2A; p<0.05**).

298 Conventionally in cell culture experiments TCM would be filtered prior to use to help remove  
299 (i) trace levels of macromolecular bacterial contaminants and (ii) serum complement  
300 aggregates that may occur during FCS heat treatment. Since the resting of cells reduced, but  
301 did not entirely abrogate, the IL-1 $\beta$  secretory response to apatitic nanoparticles (**FIGURE. 2A**),  
302 we tested whether filtration of TCM prior to the addition of CaCl<sub>2</sub> (for *in situ* apatite  
303 nanoparticle formation) would further reduce IL-1 $\beta$  secretion. In non-rested cells there was no  
304 effect (**FIGURE. 2B**) but in rested cells IL-1 $\beta$  secretion was reduced to background and could,  
305 again, be restored by the concomitant addition of LPS with the apatite nanoparticles (**FIGURE.**  
306 **2B; p<0.001**).

307 Since IL-1 $\beta$  secretion in response to apatite stimulation in rested cells was greater when using  
308 unfiltered TCM (**FIGURE. 2A**), we checked that apatite particles did not simply differ in

physical characteristics due to their formation in ‘different’ media (i.e. changes in particle size distribution or charge inadvertently brought about by filtration of the TCM). Dynamic light scattering analysis and zeta potential measures confirmed that filtration did not affect the physical characteristics of the formed particles (**SUPPLEMENTARY FIGURE. 2**). Moreover the quantitative protein corona appeared to be the same (**SUPPLEMENTARY FIGURE. 2**). We believe, therefore, that the difference is qualitative and reflects the ability of trace macromolecular pyrogens and/or serum protein aggregates to contribute to this corona. Indeed interaction of serum complement with nanoparticles can induce complement activation [30] and consequently inflammasome activation [31].

Taken together the above data suggest that under conditions that do not promote pro-IL-1 $\beta$  induction apatite does not induce significant secretion of mature IL-1 $\beta$ . From here onwards, therefore, experiments were carried out using filtered TCM and cells were challenged with apatite following 24 hours rest.

#### Effect of duration of exposure to apatite on inflammasome activation

As noted above, failure to generate IL-1 $\beta$  does not mean failure to activate the inflammasome: the latter could occur but simply have no substrate to act on (i.e. pro IL-1 $\beta$ ). Inflammasome activation may be influenced by particle properties (for example shape, size, and phase) and also by duration of exposure. To see whether (i) the inflammasome was in fact activated by apatite and (ii) to relate this to duration of apatite exposure, we followed both caspase 1 and IL-1 $\beta$  secretion over the course of 24 hours (in rested PBMC and using pre-filtered TCM). Consistent with the findings above, apatite alone did not elicit IL-1 $\beta$  production (**FIGURE. 3A**): however it did induce caspase 1 secretion (**FIGURE. 3B, p<0.01**) showing that the inflammasome had been activated. Moreover IL-1 $\beta$  production was detectable when apatite

was in the presence of LPS (to ensure that pro IL-1 $\beta$  was produced) commencing between 3-8 hours stimulation and further increasing by 24 hours (**FIGURE. 3B**, **P<0.0001**). Under these conditions, inflammasome activity was clearly induced by apatite.

Inflammasome activation by particles can be due to particle-induced reactive oxygen species and phagolysosomal destabilisation [32-34] and, in some circumstances, lead to cell death. Incubation of mononuclear cells with apatite for long periods could therefore result in artefactual particle ‘gorging’, lysosomal disruption, and cell death [2]. Indeed, in further studies we showed that apatite nanoparticles induced cell death between 6 and 12 hours incubation (**FIGURE. 4**; **\*\* p < 0.01**), irrespective of the presence or absence of LPS (data not shown) and this mirrored the timing of caspase 1 secretion (**FIGURE. 3B**).

### **Cellular responses to the apatitic nanoparticles in the absence of particle gorging.**

In light of the above results, cellular responses to apatite nanoparticles were re-addressed in a system that tried to avoid particle gorging (i.e. excessive particle loading). To confirm the extent of mononuclear cell uptake of apatite nanoparticles, by both flow cytometry and imagestream analysis, we utilised pure calcein, a widely used fluorescent probe for mineralised forms of calcium [35, 36]. Unlike the calcein-acetomethoxy derivative (Calcein-AM), pure calcein is unable to passively enter cells to any significant extent and, therefore, the presence of this probe detected within cells relies upon both the binding of calcein to mineralised calcium formed in the media *and* the cellular uptake of this stained mineralised calcium. By incubating cells in media containing calcein with and without the addition of CaCl<sub>2</sub> (i.e. to form apatite *in situ* as above) we were able to control for even minor non-specific uptake of this probe in the absence of apatite nanoparticles. Using this strategy, we showed that (i) apatite nanoparticles were taken up as early as 1 hr (**FIGURE. 5A**) (ii) significant apatite loading of monocytes was



achieved by 3 hours (**FIGURE. 5B and D**) and (iii) cells were gorged by 24 hrs exposure (**FIGURE. 5C**). These findings were confirmed by two independent techniques.

To re-test inflammasome activation without gorging, rested PBMC were first subjected to vehicle or LPS pre-stimulation to induce pro-IL-1 $\beta$  synthesis (at 0-3 hours), washed and followed by a pulse with apatite for 3 hours (from 3-6 hours), washed again and chased for 21 hours (from 6-24 hours) with TCM only. Comparisons were made to cellular responses to soluble peptidoglycan (negative control; sPg), crude peptidoglycan (positive control, Pg) and to known inflammasome activators (i.e. ATP+LPS and MSU).

Unlike the inflammasome activator, crude Pg, apatite failed to induce significant IL-1 $\beta$  versus vehicle control even when cells were primed with LPS (**FIGURE. 6A**). Moreover, the response from apatite exposure was very similar to that of the negative control, namely soluble Pg from *E.Coli*, which is not a significant activator of the inflammasome [37-39]. Unsurprisingly, without LPS priming, IL-1 $\beta$  secretion was also not observed in response to HA although it was again observed for crude Pg and positive controls of the inflammasome platform (**FIGURE. 6B** and **SUPPLEMENTARY FIGURE. 3**).

Taken together, these data show that apatite nanoparticles neither activate the inflammasome nor induce the cellular IL-1 $\beta$  secretion to any extent, except as an artefact of experimentation.

## Discussion

Nanoparticles, whether environmental [6, 10], endogenously formed [7, 8] or engineered for downstream applications [5, 9] have been well studied and clearly linked to inflammasome activation. However, *in vitro* studies have on occasions been difficult to reconcile with *in vivo* situations [14, 16, 40], suggesting that applied *in vitro* experimental conditions do not always reflect *in vivo* outcomes. Here, our work demonstrates that the secretion of IL-1 $\beta$  and the activation of the inflammasome following *in vitro* cellular challenge with apatite nanoparticles depend upon experimental conditions.

Under aseptic conditions (to minimise the possibility of contaminants such as macromolecular MAMP or complement in the system) with non-activated primary cells that were loaded but not gorged with apatite nanoparticles, we found no evidence of IL-1 $\beta$  secretion or inflammasome activation. The relevance of this to the *in vivo* situation should be carefully considered especially as, there, the source of nanoparticle exposure may be endogenous (i.e. of internal origin) or exogenous (i.e. of external origin). Endogenous particles such as bone apatite, or calcium phosphate derived from ectopic calcification, will be sterile (except during infection when the presence of nanoparticulates will not be the main concern). On the other hand, exogenous particles (e.g. dietary or environmental) are unlikely to be aseptic or, at least, unlikely to be devoid of surface adsorbed-molecules. However, during their initial *in vivo* transit, ostensibly through the lung or gastrointestinal tract, nanoparticle surfaces will interact with the myriad of molecules of endogenous biological fluids (e.g. salts, duodenal bile or lung surfactant protein, mucin, endogenous proteins, low molecular weight ligands). Through substitution these are likely to strip exogenous particles of any adsorbed, inflammasome-activating MAMPs and exchange them for more benign, self-recognised molecules. The exception is the distal gastrointestinal tract where turnover of the commensal microbiota

releases large quantities of MAMPs such as LPS and peptidoglycan. However, intestinal cells are uniquely hyporesponsive (i.e. resistant) to inflammatory stimulation by MAMPs [41]. Thus, in our view, carefully characterised aseptic conditions are appropriate for the *in vitro* study of nanoparticles.

The choice of cells ‘at rest’ to represent the *in vivo* situation could also be debated. Inflammation, especially mildly so, is common place in the population. We used primary cells because immortal or transformed cells (i.e. cell lines) clearly undergo substantial changes compared to their *in vivo* counterparts. Nonetheless, primary cells are most commonly derived from blood and, thus, may undergo substantial stress during phlebotomy and isolation by density gradient centrifugation. However, in the experiments reported herein, even when we primed rested cells with LPS, which is a significant inflammatory stimulus, we still found no cause to suggest that apatitic nanoparticles stimulated IL-1 $\beta$  secretion or, therefore, activated the inflammasome.

In our opinion it is cellular gorging of nanoparticles that is most likely responsible for *in vitro* inflammasome activation and which commonly leads to misinformation between *in vitro* and *in vivo* exposure. Phagocytic cells are programmed to mop up particles from their environment. Unlike with *in vitro* cultures, *in vivo* cells may migrate and are readily replaced by freshly recruited cells. Moreover the epithelial barrier blocks most particle entry and ensures a rate of influx that is readily dealt with by underlying macrophages or immature dendritic cells. Even when this is bypassed, such as with intravenous (i.v) infusion (e.g. i.v iron oxide nanoparticles) or intradermal injection (e.g. with tattoo ink), there is adequate circulation of particles and cells to ensure health of the organism and local structures despite marked particle-loading of cells. How, *in vitro*, one ensures that cell loading with particles matches a potential *in vivo* situation is not easily addressed. However, gorging to the point of cell dysfunction or even death is

unlikely to represent 'real life'. Genuinely toxic particles ought to be seen as such without the need for cells to gorge excessively and abnormally.

Finally, whilst our data suggest that apatitic nanoparticles do not stimulate inflammasome activation or, therefore, IL-1 $\beta$  secretion even in the presence of a pro-inflammatory stimulus, this need not apply to all (nano) particles. For example,  $\alpha$ -quartz silica particles are toxic: they are pro-inflammatory and fibrogenic *in vivo* and their genuine role in inflammasome activation seems most likely [6, 42, 43]. Amorphous microparticles of silica appear relatively benign: however, as they decrease in size into the 'nano' range, they adopt some of the inflammatory characteristics of their  $\alpha$ -quartz crystalline counterpart [44]. Fine nanoparticulate silica may therefore also activate the inflammasome. There may well be others but, nonetheless, our data challenge the idea that nanoparticles/nanominerals are necessarily special activators of the inflammasome.

**Conclusion:** *In vitro* investigation of nanoparticles/nanominerals and their potential role in the inflammasome axis requires careful experimental consideration as artefactual activation may ensue under certain conditions and therefore lead to misinterpretation. Future work should consider them carefully on a case-by-case basis, as we have done here for apatitic nanoparticles.

### **Future perspective**

We anticipate that relatively few nanomaterials will be shown to activate the inflammasome *per se* and probably in numbers not outstanding from their coarse microparticle and microfibre counterparts (e.g. quartz, asbestos etc.). The fact that nanoparticles may act as vehicles to introduce adsorbed or en-trapped substrate into cells, which in turn could activate the inflammasome, is not to be disputed. We also anticipate much greater scientific scrutiny to be given over to conditions of particle loading and experimental design in cellular or animal models that seek to understand toxicity and/or cellular handling of nanomaterials for 'real life'

scenarios. We expect the arbitrary cut off of 100nm as a nano-definition to be redundant and that the 'nano' term will be used in disciplines depending on relevant behavioural and functional activities. For example, biologically it is the mechanism of uptake and thereafter the cellular compartment that is first engaged that separates a 'nano' particle from a 'micro' particle. Finally and as previously stated by our group [2], we expect that nanoforms will be understood as safe, naturally-occurring and of physiological benefit under some circumstances.

#### **Executive summary:**

- Discrepancies in the role of (nano) particles in inflammasome activation *in vivo* and *in vitro* have been noted suggesting that applied *in vitro* experimental conditions do not always adequately mimic *in vivo* situations.
- Here, calcium phosphate (apatite) nanoparticles were synthesised *in situ* and ensuing caspase1/IL-1 $\beta$  cellular responses studied in peripheral blood mononuclear cells, under different *in vitro* conditions.
- Caspase 1/IL-1 $\beta$  responses to apatitic nanoparticles were strongly influenced by the purity of starting material (i.e. attenuated in aseptic conditions), resting status of cells (i.e. non-existent in experiments using rested cells), and duration of particle exposure (unavoidably triggered by abnormally prolonged incubation).
- This work clearly highlights that, in addition to particle characteristics, it is necessary to carefully establish experimental conditions when studying *in vitro* cellular responses to nanoparticles, as artefactual activation may ensue.

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#### **Financial & competing interests disclosure**

The authors have no financial or competing conflict of interests.

#### **Ethical conduct of research**

The authors state that they have obtained appropriate institutional review board approval or have followed the principles outlined in the Declaration of Helsinki for all human or animal experimental investigations. In addition, for investigations involving human subjects, informed consent has been obtained from the participants involved.

#### **References annotations:**

Papers of special interest have been highlighted as \*

\*[1] Comprehensive review on the physicochemical factors that shape nanoparticle-cell interactions in biological surroundings.

\*[2] Comprehensive review of the ‘bear traps’ in nanomineral characterisation, definition and attribution of biological properties.

\*[3] Emphasises the importance of the particle corona in dictating its biological outcome.

\*[4] Seminal work that set the scene in particle and inflammasome research.

\*[11] Up-to-date and elegant review on the inflammasome family.

#### **Figure legends**

**Figure. 1 Physico-chemical characterisation of *in situ* formed calcium phosphate nanoparticles.** Following synthesis, calcium phosphate particles were analysed for particle size and structure by transmission electron microscopy (**A, B and C**; scale bars 500, 100 and 20 nm respectively), for size distribution in tissue culture medium (TCM) by dynamic light

scattering **(D)**, by nanoparticle tracking analysis **(E)**, static light scattering **(F)** and for elemental composition by EDX within the TEM **(G)**; C and Cu signals are generated by the support film and grid). **(H)** Infra-red analysis of hydroxyapatite standard (Sigma, 0-200 nm nanopowder) and **(I)** infra-red analysis of the *in situ* formed calcium phosphate particles in TCM with spectral features attributed as follow: **(a)** lattice vibrations **(b)** phosphate vibration **(c)** carbonate adsorption bands at 1465-1410 cm<sup>-1</sup> **(d)** amine adsorption bands from serum proteins at 1600-16700 cm<sup>-1</sup> and **(e)** probable OH broadening from residual water with the main OH band at 3400 cm<sup>-1</sup>. T3: 3 hours, T8: 8 hours and T24: 24 hours. EDX: Energy Dispersive X-ray spectroscopy.

**Figure. 2: Influence of experimental conditions on IL-1 $\beta$  responses to apatitic nanoparticles.** IL-1 $\beta$  secretion from PBMC (1.10<sup>6</sup> cells/ml) in experiments that were carried out using unfiltered TCM **(A)** or 0.2  $\mu$ m filtered TCM **(B)**. In each setting, PBMC were either used immediately after isolation (red) or rested for 24 hours (black) and subsequently stimulated for 24 hours with apatite nanoparticles that were formed *in situ* by addition of CaCl<sub>2</sub> to TCM, in the presence or absence of LPS (10 ng/ml) as indicated in the figure. Data are represented as mean  $\pm$  SEM (n = 2). \* p < 0.05; \*\* p < 0.01 and \*\*\* P < 0.001 versus Control. C: Control. AP: Apatite, TCM: Tissue Culture Medium, LPS: Lipopolysaccharides.

**Figure. 3: Influence of duration of exposure to apatitic nanoparticles on IL-1 $\beta$  and caspase 1 secretion in PBMC.** Time course measurement for IL-1 $\beta$  **(A)** and caspase 1 **(B)** secretion from rested PBMC (1.10<sup>6</sup> cells/ml) following stimulation with LPS (black square; 10 ng/ml), apatitic nanoparticles in the presence or absence of 10 ng/ml LPS (red square and black circle, respectively), or vehicle (open circle). Data are represented as mean  $\pm$  SEM (n = 2 except at 8 hours where n = 5). \*\*\* p < 0.001 and \*\*\*\* p < 0.0001 (AP+LPS vs Control). \*p < 0.05 (AP+LPS vs Control) and \*\* p < 0.01 (AP vs Control). AP: Apatite, LPS: Lipopolysaccharide, PBMC: Peripheral blood mononuclear cells.

**Figure. 4: Apatitic nanoparticle-induced cytotoxicity.** Flow cytometry measurement of cell death from the monocyte population within PBMC ( $1.10^6$  cells/ml) that were stimulated with apatite nanoparticles (full circle) or vehicle (open circle) overtime. Data are represented as mean  $\pm$  SEM (n = 2). \*\* p < 0.01 and \*\*\* p < 0.001. AP: Apatite, PBMC: Peripheral blood mononuclear cells.

**Figure. 5: Apatitic nanoparticle uptake by monocytes. (A-C)** Flow cytometric measurement in cells (CD14<sup>+</sup> monocytes) that were stimulated with apatite or vehicle for (A) 1 hour, (B) 3 hours and (C) 24 hours continuously. In each of the six panels only the viable CD14<sup>+</sup> gated monocytes are imaged and thus occupy the top two quadrants. The colours represent density of cells in their plotted space (blue being the most dense and red the least). The right hand quadrants represent cells showing calcein positivity and thus intracellular calcium ('Unstimulated') while the addition of apatite shows a marked and rapid increase in calcein positivity ('AP') and by 24 hours few viable cells remain. (D) Imaging with a second independent technique, namely Image stream, showing three separate example images of CD14<sup>+</sup> Calcein<sup>+</sup> gated cells 3 hours after challenge and showing internalisation of AP particles.

**Figure. 6: Optimised innate cellular responses to apatitic nanoparticles.** IL-1 $\beta$  responses from PBMC ( $1.10^6$  cells/ml), with (A) or without (B) LPS pre-stimulation (3 hours), and then challenged with vehicle, AP nanoparticles, soluble or crude peptidoglycan (Sol Pg and Pg, both at 10  $\mu$ g/ml). IL-1 $\beta$  was measured after a further 3 hours (i.e. between 3-6 hours, red column) and 18 hours after that (i.e. between 6-24 hours; black column). Data are represented as mean  $\pm$  SEM (n = 4). \*\*\*\*p<0.0001 and \*\*\*p<0.001 versus Control. C: Control, Pg: Peptidoglycan, Sol: Soluble, AP: Apatite, LPS: Lipopolysaccharides, PBMC: Peripheral blood mononuclear cells.



**Supplementary Figure. 1: Physico-chemical characteristics of *in situ* formed calcium phosphate.** (A) TEM micrograph of FIGURE 1 C under bright field mode showing the nanostructured nature of the primary particles, inset selected area diffraction. (B) Following synthesis, calcium phosphate particles were analysed for particle size by dynamic light scattering. Data are represented as % Volume and correspond to data already presented in FIGURE 1D as % intensity. Both graphs show similar particle size distribution whether expressed as % volume or intensity.

**Supplementary Figure. 2: Influence of filtration of TCM on the physico-chemical characterisation of *in situ* formed apatitic particles.** Size distribution (A), charge (B) and protein content (C) of apatitic nanoparticles that were formed following addition of CaCl<sub>2</sub> to pre-filtered (0.2 µm cut-off; fTCM) and non-filtered TCM (nfTCM). TCM: Tissue culture medium. For protein determination, following formation of apatite nanoparticles for 24 hours in fTCM and nfTCM, particle suspensions were spun down and supernatants collected. Protein content of the samples were then analysed by the Bradford protein assay, according to manufacturer's protocol, and values for adsorbed protein calculated as follow:

% adsorbed protein =  $100 \times [(\text{Total protein, i.e. fTCM or nfTCM}) - (\text{non-adsorbed protein, i.e. supernatants of particle suspensions})]$ . Data are representative of two independent experiments.

**Supplementary Figure. 3: Positive controls for inflammasome activation and cellular IL-1β secretion.** PBMC (1.10<sup>6</sup> cells/ml) were stimulated with ATP (1 mM), LPS (10 ng/ml), MSU (100 µg/ml) or concomitant ATP+LPS and ensuing IL-1β responses measured at 3 hours. Data are represented as mean ± SEM (n = 2). \* p < 0.05 and \*\* p < 0.01. LPS: Lipopolysaccharides, ATP: adenosine triphosphate, MSU: monosodium urate crystals, PBMC: Peripheral blood mononuclear cells.

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